

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION		<i>OK</i>	<i>4-7-5</i>
O.I.P.E. CLASSIFIER		<i>8</i>	<i>4-19-79</i>
FORMALITY REVIEW	<i>YC</i>	<i>7817</i>	<i>4-27-79</i> <i>6-30-79</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral).... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
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41	✓
42	✓
43	✓
44	✓
45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

Claim	Date
51	✓
52	✓
53	✓
54	✓
55	✓
56	✓
57	✓
58	✓
59	✓
60	✓
61	✓
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Claim	Date
101	✓
102	✓
103	✓
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105	✓
106	✓
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138	✓
139	✓
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143	✓
144	✓
145	✓
146	✓
147	✓
148	✓
149	✓
150	✓

BEST AVAILABLE COPY If more than 150 claims or 10 actions  
 staple additional sheet here